PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/577867

| | | SMALL ENTITY TYPE | | OR | OTHER THAN OR SMALL ENTITY | | | | | | |
|---|--|---|--|-------------------------------|----------------------------|----------------------------------|---------------------|------------------------|-------|----------------------------|------------------------|
| U.S. NATIONAL STAGE FEES | | | (Column | , | ì | Column 2) | RATE | FEE |] | RATE | FEE |
| BAS | IC FEE | · <u>E</u> | SMALL ENT. = \$ 150 | | LARG | SE ENT. = \$ 300 | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | Satisfies PCT Article 33(1)- (4) = \$50/\$100 | | | her situations = 100 / \$ 200 | EXAM. FEE | **** | | EXAM. FEE | 200 |
| SEARCH FEE | | | U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400 | | | ther situations = 250 / \$ 500 | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 = | X \$ 125 = | | İ | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | 20 minus 20 = | | * | | X \$ 25 = | | OR | X \$ 50 = | |
| INDI | EPENDENT CL | AIMS | / minus 3 = | | * | | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPENI | DENT CLAIM PRI | ESENT | | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | TOTAL | | OR | TOTAL | 780 | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Colur | nn 2) | (Column 3) | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| TOTAL ADDIT. FEE | | | | | | | | | OR | TOTAL ADDIT. FEE | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN-THIS-SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | |